

2016 Montana Prevention Needs Assessment Student Survey Agreement Form

Please **complete** and return form in the enclosed self addressed stamped envelope regardless of your district's decision to participate or not to participate in the PNA.

Thank you for your support for the 2016 Montana Prevention Needs Assessment Community Student Survey. We plan to administer the survey the dates of February 1 to April 29, 2016. If the preferred dates cannot be accommodated by your district, we ask that you contact Mary Johnstun, Project Director at (801) 842-2682, fax: 888-715-7639 (toll free), or e-mail: mary@bach-harrison.com to make arrangements for alternative survey dates that will meet your district's needs.

Please check: ☐ **Yes**, we would like to participate

District Name: _____

Mailing Address: _____

Street Address for FED EX Delivery: _____

City: _____ Zip: _____

Please give us the name of one individual at your district that we can work with to coordinate survey activities:

Name: _____ Phone: _____

Position or Title: _____

Fax: _____ e-mail: _____

Please provide the total number of students enrolled in each of the following grade levels (Note: if you do not have any students in a particular grade or do not wish for the option of surveying grades 7, 9 and 11 please write "0"):

Total number of students: 8th Grade _____ 10th Grade _____ 12th Grade _____

Optional Students: 7th Grade _____ 9th Grade _____ 11th Grade _____

What is the average number of students per classroom in your district? _____

Please check: ☐ **No**, we are unable to participate at this time.

District Name: _____

City: _____

District Superintendent: Please sign and date below to verify your district's decision regarding participation in the 2016 student survey.

(Signature, Title)

(Date)

Please return this agreement form by November 24, 2015
to Mary Johnstun, Survey Project Director, Bach Harrison LLC, 116 S. 500 E. Salt Lake City, UT 84102